

**AMENDMENT No. 1 TO THE GRANT AGREEMENT  
BETWEEN  
THE UNITED NATIONS DEVELOPMENT PROGRAMME (“UNDP”)  
AND  
CRODA FOUNDATION (“THE DONOR”)**

Reference is made to the Grant Agreement, entered into on 24 June 2022 by and between the UNITED NATIONS DEVELOPMENT PROGRAMME (“UNDP”), and CRODA FOUNDATION (the “DONOR”), and together with UNDP, the “Parties”, (hereinafter referred to as the “Agreement”).

**WHEREAS** the Agreement provides that any modification thereto shall require an amendment in writing between the Parties, duly signed by the authorized representatives of UNDP and the CRODA FOUNDATION

**WHEREAS** UNDP has requested and CRODA FOUNDATION has agreed to amend the grant agreement in order to extend the period of grant utilization.

**NOW THEREFORE**, the Parties agree:

1. The relevant Agreement provisions indicated below are hereby amended as follows:

(a) **Article I The Grant, no. 1 section (c)** of the Agreement is hereby amended in its entirety to read as follows:

*“ The purpose of the Grant is to fund the Programme/Project (specifically to fund 13 ventilators for hospitals and technical assistance to the West Java Province in Indonesia) as set out in the Concept Note ”*

(b) **Article II no. 4** of the Agreement is hereby amended in its entirety to read as follows:

*“The Grant shall be used for the Programme/Project only and the Programme/Project shall be completed and the Grant spent on the Programme/Project on 24 December 2023”*

(c) **Annex I** of the Agreement is hereby amended in its entirety to the Annex I of this Amendment.

(2) Except as expressly modified herein in accordance with paragraph 1, all other terms of the Agreement shall remain unchanged and shall continue in full force and effect.

(3) This Amendment will come into effect as of the date of last signature hereof by UNDP and the CRODA FOUNDATION.

**For UNDP:**

By

DocuSigned by:  
  
4B63DD0498CD41A...

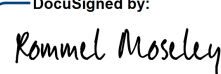
Norimasa Shimomura

Title: Resident Representative

Date: 23-May-2023

**For the CRODA FOUNDATION:**

By

DocuSigned by:  
  
4A7AA7ED60DD412...

(typed or printed name) Rommel Moseley

Title: Executive Director

Date: 5/23/2023

Annex 1. Concept Note

**Concept Note Proposal**

**HEART Project for Provision of 13 Ventilators to Increase Access to Quality Healthcare**

**I. Project Title and brief description**

Health Governance Initiative (HEART)

Working with government counterparts, private sector and civil society organisations, UNDP Indonesia's Health Governance programme will leverage UNPD's global expertise in governance for health and implementation support for large health initiatives. The programme will develop innovative solutions and capacities through technical assistance, south-south cooperation, and partnerships for improved and sustained health outcomes for all. The Health Governance Programme will have two outputs: (i) By 2022, strengthened national policy and institutional environment that is governing access and delivery of needed health technologies and affordable medicines through evidence based and multisector collaborations. (ii) By 2022, the performance of national programmes is improved and positively impacts the coverage and the sustainability of services delivery, and the health system better integrates environmental concerns in climate change adaptation and waste management practices to mitigate or limit its impact on environment(s).

The success of achieving these outputs, however, was disrupted during the COVID-19 pandemic. Therefore, the project has been deeply involved in COVID-19 response in Indonesia since March 2020. Key capacity support by UNDP includes expanding access to quality health services, strengthening the health system, stakeholder coordination, socio-economic support, and improving big data management. Beyond the COVID-19 pandemic, UNDP's key capacity support acts as a sustainable work that contribute to the delivery of effective healthcare and digital health system development. This initiative leverages UNDP's expertise in collaboration platforms, medical equipment procurement services, supply chain management systems, and medical waste management.

The above-mentioned supports will be delivered as part of the wider response of the United Nations development system in Indonesia under the leadership of UN Resident Coordinator system and will include joint initiatives with other UN agencies. UNDP will also work in close cooperation with the Government of Indonesia as well as bilateral and multilateral development partners.

## **II. Recipient**

13 (thirteen) recommended Public Hospitals in West Java Province treating COVID-19 patients age under 12 to 80+ with saturation (oxygen) below 93 percent.

## **III. Location(s) of project**

The target areas for distribution are government-recommended hospitals in West Java, prioritized by their urgent needs of ventilators. The assessment of the need of these hospitals was conducted by District Health Office, as instructed by the Provincial Government Office of West Java.

## **IV. Background to Project**

COVID-19 cases in Indonesia have spread rapidly even though efforts to tackle the COVID-19 pandemic have been in place since the president declared COVID-19 pandemic a national disaster on 13 April 2020. The government immediately established a task force to control the COVID-19 pandemic at national, provincial and district levels and the country response plan was developed. Numerous regulations were issued including the large-scale social restrictions (PSBB). In early 2021, the PSBB focuses on the islands of Java and Bali, where cases are high due to high dense population. The virus remains a public health burden to this day, where a total of 6.73 million cases result in 161,000 deaths have been recorded up until February 2023. The pandemic have overwhelmed the capacity of the healthcare system, in which access to essential health services and public health programmes become significantly disrupted even beyond the emergency state was taken away.

Exacerbating the halt in healthcare delivery, the COVID-19 virus continues to mutate to produce new variants. A new type of COVID-19 virus named Delta spiked the number of cases in the summer of 2021, which caused overburden of services in health facilities. Patients who are infected with the virus experience a range of mild to severe symptoms. Examples of the main symptoms are fever, cough, chest tightness, and dyspnoea. Although most sufferers will experience mild illness, about 5% will become critical and require intensive care. The patient will develop dyspnoea and 2.5 days later will progress rapidly to acute respiratory distress syndrome (ARDS). In critically ill patients, acute hypoxemic respiratory failure will be found.

The management of confirmed COVID-19 patients has been made. Patients with moderate non-pharmacological levels are recommended for complete rest, adequate caloric intake, electrolyte control, hydration status (fluid therapy), and oxygen. Signs of health conditions also need to be monitored such as respiratory rate 30x/min, oxygen saturation with pulse oximetry 93% and others. Monitoring of critical conditions resulting in respiratory failure also needs to be done.

However, health facilities with shortage of medical devices face its own challenges in treating these patients.

In line with these issues, the need for ventilators to treat patients increases. Beside the continuation identification of COVID-19 patients with critical symptoms and low oxygen saturation, ventilators are also used in life-saving situations such as surgeries, stroke, sudden cardiac arrests, pneumonia, etc. The versatility of ventilators in hospital settings create a sustainable use of the device in ensuring the high quality of health care services, which contribute to the Sustainable Development Goal no. 3 in ensuring healthy lives and promote well-being for all at all ages.

The number of hospitals in West Java province that lack ventilators create the urgency to address the need to treat patients experiencing dyspnoea, with symptoms described an intense tightening in the chest, air hunger, difficulty breathing, breathlessness or a feeling of suffocation—whether that is caused by COVID-19 infection or other causes. Ventilators have been observed to be lifesaving for people with severe respiratory symptoms, including those with COVID-19 who develop acute respiratory distress syndrome. Roughly 2.5% of people with COVID-19 will need a mechanical ventilator. A January 2021 study<sup>1</sup> sought to calculate the death rate among 57,420 people around the world who needed to go on a mechanical ventilator due to severe COVID-19 symptoms. The researchers estimate that the death rate could be anywhere from 43 to 64 percent. The death rate was estimated to be 47.9 percent in people under the age of 40 and 84.4 percent in people over the age of 80.

Data collection regarding shortages of medical devices in hospitals in rural parts of West Java provinces reveal that on average, hospitals lack at least 11 ventilators<sup>2</sup>. Therefore, additional ventilators will help hospitals in fulfilling their medical equipment shortages, which will improve their quality rating in delivering health services for the population. As the ventilators can be used for patients under 5kg and are equipped with additional neonate breathing circuit, the number of patients who will benefit from these ventilators increase exponentially. The potential quality improvement of patient treatment in these chosen hospitals will contribute to the strengthening of Indonesia's health system capacity in addressing complications of COVID-19 infections and the overall expansion of quality health care delivery system, including children health.

1 Lim, Z. J., Subramaniam, A., Ponnappa Reddy, M., Blecher, G., Kadam, U., Afroz, A., Billah, B., Ashwin, S., Kubicki, M., Bilotta, F., Curtis, J. R., & Rubulotta, F. (2021). Case Fatality Rates for Patients with COVID-19 Requiring Invasive Mechanical Ventilation. A Meta-analysis. *American journal of respiratory and critical care medicine*, 203(1), 54–66. <https://doi.org/10.1164/rccm.202006-2405OC>

2 Need-Assessment result from 27 hospitals in West Java, Indonesia. November 2022.

#### **IV. Project Goals/Milestones/Impact on Community**

UNDP Indonesia and the Ministry of Health have been working together in a long-term partnership on health governance that is aimed at narrowing health development gaps and meeting the SDGs commitments. This partnership was further expanded with the signing of the Project Document on Health Governance Initiative focusing on the support to strengthen Indonesia's health system capacity through policy advocacy, evidence-based generation intervention, technical assistance, and partnerships b adoptions of information technology. HEART project will contribute to the UNDP Indonesia Country Programme 2021-2025 developed in partnership with the Indonesian Government and supporting national efforts to achieve the 2030 Sustainable Development Goal indicator 3.8.1 regarding coverage of essential health services.

Specifically, HEART contributes to the emergency efforts of COVID-19 through the procurement of 4 Autoclaves, 4 incinerators in the improvement of medical waste management; 16 High-Flow Nasal Cannula for better patient management; and development of Electronic System for Immunization Logistics Recording (SMILE) that has recorded more than 400 million doses of COVID-19 vaccines. The program also contributes to the strengthening of health system through the expansion of access to quality care by contributing to the development of Blue Print of Indonesia's Digital Health Transformation; initiation of Tele-Cytocography to alleviate burdens of maternal, stillbirth, and neonatal deaths; provision of technical assistance to the Ministry of Health as Primary Recipient of Global Fund in AIDS, Tuberculosis, and Malaria programs; and the procurement of the 13 ventilators funded by the Croda Foundation.

HEART also conduct continuous monitoring as planned in the HEART Monitoring and Evaluation Framework. The document helps reorient the focus of the program to systematic development changes and improvement of people's lives. This result-oriented monitoring and evaluation framework that records outputs, activities, indicators and data collection method highlight national ownership, capacity building and human development. Thus, the effectiveness and quality of the HEART program is being continuously monitored and evaluated before, during and after each activity in collaboration with data collection at the end beneficiaries level.

#### **V. Number of Lives Will be Impacted and Improved by this Project**

Est. 105,000 patients (52,500 men and 52,500 women) will be benefited to gain access to ventilators on the assumption that 15% of COVID-19 patients in West Java is experiencing breathing problems. Due to the wide range of utilization of the ventilators, the distribution of this machine will further improve the management of COVID-19 and non-COVID-19 patients.

The end beneficiaries will be requested to ask data on the amount of patients accessing the ventilators on month 3 and 6 after training in respective hospitals.

In addition, the ventilator can be used by newborns weighing under 5kg. According to a study conducted to observe the reduction in 24-hour newborn mortality, a further decrease of mortality over the five-year period, and increase in newborns ventilation skills<sup>3</sup>. The high delivery rate of the 13 hospitals that will be granted the ventilators lays the foundation of the importance of the additional neonatal breathing circuit. Thus, the number of patients whose lives will be improved will increase than said approximate.

## VI. Investment Required

No	Component	Quantity	UoM	Unit Cost (IDR)	Total Cost (IDR)	Total Cost (GBP)
1	Ventilator	13	Unit	124,787,155	1,622,233,015	88,000
2	Handling and Insurance	1	Package	57,699,878	57,699,878	3,130
3	Coordination & Technical Assistance to Provincial Health Office	6	Months	16,591,020	99,546,120	5,400
4	Monitoring, reporting & communication/publication	1	Package	97,757,973	97,757,973	5,303
5	Handover Ceremony	1	Package	58,990,291	58,990,291	3,200
				<b>Sub Total Activity Budget</b>	1,936,227,277	105,033
6	GMS			8% of Activity Budget		8,403
				<b>Sub-total</b>		
7	Levy			1% of Activity Budget.+ GMS		1,134
				<b>TOTAL</b>		<b>114,570</b>

<sup>3</sup>Stordal, Ketil et al. "Increased perinatal survival and improved ventilation skills over a five-year period: An observational study." *PLoS one* vol. 15,10 e0240520. 12 Oct. 2020. doi:10.1371/journal.pone.0240520

## VII. Related SDGs

SDG indicator 3.8.1 regarding coverage of essential health services.  
 SDG Indicator 3.8.2 regarding number of people covered by a public health system per 1,000 population  
 SDG 17 Partnerships for sustainable development

## VIII. Case Study

Maintaining the resilience of health services is one of the crucial COVID19 response actions in Indonesia. UNDP continues to provide support for the MOH and other key stakeholders to address the needs of the healthcare system. 75 ventilators which were provided by WHO and IOM had been delivered to the 35 COVID-19 referral hospitals across the country. In addition, 16 High Flow Nasal Cannulas had been procured and to be delivered to 2 hospitals in Manado and Padang. These was intended to improve the care of COVID19 patients' management and prevent progression of disease to a more fatal stage. To improve medical waste management, UNDP procured 4 incinerators installed in 4 locations and 4 autoclaves for 4 hospitals throughout different provinces across Indonesia. Additional supporting tools and services have also been provided to ensure that the delivered equipment is functioning and contributing to the increased usage of proper waste disposals.

## IX. Timeline

PLANNED ACTIVITIES	DESCRIPTION	Timeline												
		12	1	2	3	4	5	6	7	8	9	10	11	12
<b>Activity 1</b>														
Procurement plan of Ventilator	Purchase 13 ventilators													
<b>Activity 2</b>														
Delivery of Ventilator	Deliver 13 ventilators													
<b>Activity 3</b>														
Monitoring	Monitoring													

Reporting / Publication	Publication													
Communication	Technical Coordinations													
<b>Activity 4</b>														
Coordination with Provincial Health Office	Coordination Meeting													
Technical Assistance to Provincial Health Office	Salary Staff													

### **X. Disclaimer**

Any agreement to be signed between UNDP Country Office Indonesia and CRODA Foundation will be subject to further consultation between both parties and the outcome of UNDP's Due Diligence Process for engagement with private sector.